

ISSUE SLIP STAPLE AREA (for additional cross reference)

| POSITION                  | INITIALS   | ID NO.       | DATE           |
|---------------------------|------------|--------------|----------------|
| FEE DETERMINATION         | <i>PMW</i> | <i>67114</i> | <i>3/6/60</i>  |
| Q.I.P.E. CLASSIFIER       |            | <i>71163</i> | <i>3/11/60</i> |
| FORMALITY REVIEW          | <i>CM</i>  | <i>71163</i> | <i>4/29/60</i> |
| RESPONSE FORMALITY REVIEW |            |              |                |

INDEX OF CLAIMS

- Rejected  
 - Allowed  
 - (Through numeral) Canceled  
 - Restricted  
 N Non-elected  
 I Not to issue  
 A Appeal  
 O Objected

| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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